

# Eye Assistant Model Papers

## EYELIDS, CONJUNCTIVA, CORNEA AND SCLERA

**1. Distichiasis is:**

- a. Misdirected eyelashes
- b. Accessory row of eyelashes
- c. Downward drooping of upper lid
- d. Outward protrusion of lower lid

**ANSWER: B**

**2. Band shaped keratopathy is commonly caused by deposition of:**

- a. Magnesium salt
- b. Calcium salt
- c. Ferrous salt
- d. Copper salt

**ANSWER: B**

**3. Irrespective of the etiology of a corneal ulcer, the drug always indicated is:**

- a. Corticosteroids
- b. Cycloplegics
- c. Antibiotics
- d. Antifungals

**ANSWER: B**

**4. Dense scar of cornea with incarceration of iris is known as:**

- a. Adherent Leucoma
- b. Dense leucoma
- c. Ciliary staphyloma
- d. Iris bombe

**ANSWER: A**

**5. Corneal sensations are diminished in:**

- a. Herpes simplex
- b. Conjunctivitis
- c. Fungal infections
- d. Marginal keratitis

**ANSWER: A**

**6. The color of fluorescein staining in corneal ulcer is:**

- a. Yellow
- b. Blue
- c. Green
- d. Royal blue

**ANSWER: C**

**7. Phlycten is due to:**

- a. Endogenous allergy
- b. Exogenous allergy
- c. Degeneration
- d. None of the above

**ANSWER: A**

**8. A recurrent bilateral conjunctivitis occurring with the onset of hot weather in young boys with symptoms of burning, itching, and lacrimation with large flat topped cobble stone papillae raised areas in the palpebral conjunctiva is:**

- A. Trachoma
- B. Phlyctenular conjunctivitis
- C. Mucopurulent conjunctivitis
- D. Vernal keratoconjunctivitis

**ANSWER: D**

**9. Which of the following organism can penetrate intact corneal epithelium?**

- A. Strept pyogenes
- B. Staph aureus
- C. Pseudomonas pyocyanaea
- D. Corynebacterium diphtheriae

**ANSWER: D**

**10. A 12 years old boy receiving long term treatment for spring catarrh, developed defective vision in both eyes. The likely cause is:**

- a. Posterior subcapsular cataract
- b. Retinopathy of prematurity
- c. Optic neuritis
- d. Vitreous hemorrhage

**ANSWER: A**

**11. A young child suffering from fever and sore throat began to complain of lacrimation. On examination, follicles were found in the lower palpebral conjunctiva with tender preauricular lymph nodes. The most probable diagnosis is:**

- a. Trachoma
- b. Staphylococcal conjunctivitis
- c. Adenoviral conjunctivitis
- d. Phlyctenular conjunctivitis

**ANSWER: C**

**12. Patching of the eye is contraindicated in:**

- a. Corneal abrasion
- b. Bacterial corneal ulcer
- c. Mucopurulent conjunctivitis
- d. After glaucoma surgery

**ANSWER: C**

**13. Ten years old boy complains of itching. On examination, there are mucoid nodules with smooth rounded surface on the limbus, and mucous white ropy mucopurulent conjunctival discharge. He most probably suffers from:**

- a. Trachoma
- b. Mucopurulent conjunctivitis
- c. Bulbar spring catarrh
- d. Purulent conjunctivitis

**ANSWER: C**

**14. In viral epidemic kerato-conjunctivitis characteristically there is usually:**

- a. Copious purulent discharge
- b. Copious muco-purulent discharge
- c. Excessive watery lacrimation
- d. Mucooid ropy white discharge

**ANSWER: C**

**15. Corneal Herbert's rosettes are found in:**

- a. Mucopurulent conjunctivitis
- b. Phlyctenular keratoconjunctivitis
- c. Active trachoma
- d. Spring catarrh

**ANSWER: C**

**16. A patient complains of maceration of skin of the lids and conjunctiva redness at the inner and outer canthi. Conjunctival swab is expected to show:**

- a. Staphylococcus aureus.
- b. Streptococcus viridans.
- c. Streptococcus pneumoniae
- d. Morax- Axenfeld diplobacilli

**ANSWER: D**

**17. Tranta's spots are noticed in cases of:**

- a. Active trachoma
- b. Bulbar spring catarrh
- c. Corneal phlycten
- d. Vitamin A deficiency

**ANSWER: B**

**18. A painful, tender, non itchy localized redness of the conjunctiva can be due to:**

- a. Bulbar spring catarrh.
- b. Episcleritis.
- c. Vascular pterygium.
- d. Phlyctenular conjunctivitis.

**ANSWER: B**

**19. In trachoma the patient is infectious when there is:**

- a. Arlt's line
- b. Herbert's pits
- c. Post-trachomatous concretions.
- d. Follicles and papillae in the palpebral conjunctiva.

**ANSWER: D**

**20. A female patient 18 years old, who is contact lens wearer since two years, is complaining of redness, lacrimation and foreign body sensation of both eyes. On examination, visual acuity was 6/6 with negative fluorescein test. The expected diagnosis can be:**

- a. Acute anterior uveitis.
- b. Giant papillary conjunctivitis.
- c. Bacterial corneal ulcer.
- d. Acute congestive glaucoma

**ANSWER: B**

**21. Fifth nerve palsy could cause:**

- a. Ptosis
- b. Proptosis
- c. Neuropathic keratopathy
- d. Lagophthalmos

**ANSWER: C**

**22. Topical steroids are contraindicated in a case of viral corneal ulcer for fear of:**

- a. Secondary glaucoma
- b. Cortical cataract.
- c. Corneal perforation
- d. Secondary viral infection.

**ANSWER: C**

**23. The sure diagnostic sign of corneal ulcer is**

- a. Ciliary injection
- b. Blepharospasm
- c. Miosis
- d. Positive fluorescein test.

**ANSWER: D**

**24. The effective treatment of dendritic ulcer of the cornea is:**

- a. Surface anesthesia
- b. Local corticosteroids
- c. Systemic corticosteroids
- d. Acyclovir ointment

**ANSWER: D**

**25. Herpes simplex keratitis is characterized by:**

- a. Presence of pus in the anterior chamber
- b. No tendency to recurrence
- c. Corneal hyposthesia
- d. Tendency to perforate

**ANSWER: C**

**26. Bacteria, which can attack normal corneal epithelium:**

- a. Neisseria gonorrhoea.
- b. Staphylococcal epidermidis
- c. Moraxella lacunata.
- d. Staphylococcal aureus

**ANSWER: A**

**27. Advanced keratoconus is least to be corrected when treated by:**

- a. Hard contact Lens,
- b. Rigid gas permeable (RGP) contact lens
- c. Spectacles.
- d. Keratoplasty.

**ANSWER: C**

**28. Organisms causing angular conjunctivitis are:**

- a. Moraxella Axenfeld bacilli
- b. Pneumococci
- c. Gonococci
- d. Adenovirus

**ANSWER: A**

**29. Chalazion is a chronic inflammatory granuloma of**

- a. Meibomian gland
- b. Zies's gland
- c. Sweat gland
- d. Wolfring's gland

**ANSWER: A**

**30. Deep leucoma is best treated by:**

- A. Tattooing
- B. Lamellar keratoplasty
- C. Keratectomy
- D. Penetrating keratoplasty

**ANSWER: D**

**31. Blood vessels in a trachomatous pannus lie:**

- a. Beneath the Descemet's membrane.
- b. In the substantia propria.
- c. Between Bowman's membrane & substantia propria.
- d. Between Bowman's membrane & Epithelium.

**ANSWER: D**

**32. In vernal catarrh, the characteristic cells are:**

- a. Macrophage
- b. Eosinophils
- c. Neutrophils
- d. Epitheloid cells

**ANSWER: B**

**33. Ptosis in Horner's syndrome, is due to paralysis of:**

- a. Riolan's muscle
- b. Horner's muscle
- c. Muller's muscle
- d. The levator palpebral muscle
- e. Orbicularis oculi muscle

**ANSWER: C**

**34. Severe congenital ptosis with no levator function can be treated by:**

- A. Levator resection from skin side
- B. Levator resection from conjunctival side
- C. Fascia lata sling operation
- D. Fasanella servat operation

**ANSWER: C**

**35. The commonest cause of hypopyon corneal ulcer is:**

- a. Moraxella
- b. Gonococcus
- c. Pneumococcus
- d. Staphylococcus

**ANSWER: C**

**36. Irrespective of the etiology of a corneal ulcer, the drug always indicated is:**

- a. Corticosteroid
- b. Atropine
- c. Antibiotics
- d. Antifungal

**ANSWER: B**

**37. Fleischer ring is found in:**

- a. Keratoconus
- b. Chalcosis
- c. Argyrosis
- d. Buphthalmos
- e. None of the above

**ANSWER: A**

**38. Intercalary staphyloma is a type of:**

- a. Equatorial staphyloma
- b. Posterior staphyloma
- c. Scleral staphyloma
- d. Anterior staphyloma

**ANSWER: C**



**39. Cornea is supplied by nerve fibers derived from:**

- a. Trochlear nerve
- b. Optic nerve
- c. Trigeminal nerve
- d. Oculomotor nerve

**ANSWER: C**

**40. Ciliary injection is not seen in:**

- a. Herpetic keratitis
- b. Bacterial ulcer
- c. Chronic iridocyclitis
- d. Catarrhal conjunctivitis
- e. Acute iridocyclitis

**ANSWER: D**

**41. Most of the thickness of cornea is formed by:**

- a. Epithelial layer
- b. Substantia propria
- c. Descemet's membrane
- d. Endothelium

**ANSWER: B**

**42. A 30 years old male presents with a history of injury to the eye with a leaf 5 days ago and pain, photophobia and redness of the eye for 2 days. What would be the most likely pathology?**

- a. Anterior uveitis
- b. Conjunctivitis
- c. Fungal corneal ulcer
- d. Corneal laceration

**ANSWER: C**

**43. Ptosis and mydriasis are seen in:**

- a. Facial palsy
- b. Peripheral neuritis
- c. Oculomotor palsy
- d. Sympathetic palsy

**ANSWER: C**

**44. Commonest cause of posterior staphyloma is:**

- a. Glaucoma
- b. Retinal detachment
- c. Iridocyclitis
- d. High myopia

**ANSWER: D**

#### **LACRIMAL SYSTEM**

**45. In DCR, the opening is made at:**

- a. Superior meatus
- b. Middle meatus
- c. Inferior meatus

**ANSWER: B**

**46. Schirmer's test is used for diagnosing:**

- a. Dry eye
- b. Infective keratitis
- c. Watering eyes
- d. Horner's syndrome

**ANSWER: A**

**48. 3 months old infant with watering lacrimal sac on pressing causes regurgitation of mucopus material. What is the appropriate treatment?**

- a. Dacryocystorhinostomy
- b. Probing
- c. Probing with syringing
- d. Massage with antibiotics up to age of 6 months
- e. Dacryocystectomy

**ANSWER: D**

#### **ORBIT**

**49. Most common cause of adult unilateral proptosis**

- a. Thyroid orbitopathy
- b. Metastasis
- c. Lymphoma
- d. Meningioma

**ANSWER: A**

**50. Evisceration is:**

- a. Excision of the entire eyeball
- b. Excision of all the inner contents of the eyeball including the uveal tissue
- c. Photocoagulation of the retina
- d. Removal of orbit contents

**ANSWER: B**

**51. Lagophthalmos can occur in all of the following except;**

- a. 7<sup>th</sup> cranial nerve paralysis
- b. 5<sup>th</sup> cranial nerve paralysis
- c. Thyrotoxic exophthalmos
- d. Symblepharon

**ANSWER: B**

**52. The most important symptom differentiating orbital cellulitis from panophthalmitis is:**

- a. Vision
- b. Pain
- c. Redness
- d. Swelling

**ANSWER: A**

**53. The commonest cause of unilateral exophthalmos is:**

- a. Thyroid eye disease
- b. Lacrimal gland tumour
- c. Orbital cellulitis
- d. Cavernous sinus thrombosis

**ANSWER: A**

**54. Proptosis is present in the following condition except:**

- a. Horner's syndrome
- b. Orbital cellulitis
- c. Thyroid ophthalmopathy
- d. Cavernous sinus thrombosis

**ANSWER: A**

## UVEA

**55. All of the following are part of uvea except:**

- a. Pars plicata
- b. Pars plana
- c. Choroid
- d. Schwalbe's line

**ANSWER: D**

**56. One of the earliest features of anterior uveitis includes:**

- a. Keratic precipitates
- b. Hypopyon
- c. Posterior synechiae
- d. Aqueous flare

**ANSWER: D**

**57. In anterior uveitis the pupil is generally:**

- a. Of normal size
- b. Constricted
- c. Dilated

**ANSWER: B**

**58. Koeppe's nodules are found in:**

- a. Cornea
- b. Sclera
- c. Iris
- d. Conjunctiva

**ANSWER: C**

**59. Aqueous humour is formed by:**

- a. Epithelium of ciliary body
- b. Posterior surface of iris
- c. Lens
- d. Pars plana

**ANSWER: A**

**60. The earliest feature of anterior uveitis includes:**

- a. Keratic precipitates
- b. Hypopyon
- c. Posterior synechiae
- d. Aqueous flare

**ANSWER: D**

## **LENS**

**61. Which laser is used for capsulotomy?**

- a. Diode laser
- b. Carbon dioxide laser
- c. Excimer laser
- d. ND: YAG laser

**ANSWER: D**

**62. Unilateral aphakia is likely to be corrected by any of the following except:**

- a. Anterior chamber intraocular lens
- b. Posterior chamber intraocular lens
- c. Contact lens
- d. Glasses

**ANSWER: D**

**63. Phakolytic glaucoma is best treated by:**

- a. Fistulizing operation
- b. Cataract extraction
- c. Cyclo-destructive procedure
- d. Miotics and Beta blockers

**ANSWER: B**

**64. Lens induced glaucoma is least likely to occur in:**

- a. Intumescent cataract.
- b. Anterior lens dislocation,
- c. Posterior subcapsular cataract
- d. Posterior lens dislocation

**ANSWER: C**

**65. Earliest visual rehabilitation occurs with:**

- a. Phacoemulsification plus intraocular lens implantation
- b. Intracapsular cataract extraction plus intraocular lens implantation
- c. Extracapsular cataract extraction plus intraocular lens implantation
- d. Small incision cataract extraction

**ANSWER: A**

**66. Best site where intraocular lens is fitted:**

- a. Capsular ligament
- b. Endosulcus
- c. Ciliary supported
- d. Capsular bag

**ANSWER: D**

**67. After 48 hours of a cataract extraction operation, a patient**

**complained of ocular pain and visual loss. On examination, this eye looked red with ciliary injection, corneal oedema and absent red reflex. The first suspicion must be:**

- a. Secondary glaucoma.
- b. Anterior uveitis.
- c. Bacterial endophthalmitis.
- d. Acute conjunctivitis

**ANSWER: C**

## **GLAUCOMA**

**68. All the following associated open angle glaucoma include all the following except:**

- a. Roenne's nasal step
- b. Enlarged blind spot
- c. Generalized depression of isopters
- d. Loss of central fields
- e. Tubular vision

**ANSWER: D**

**69. The treatment of choice for the other eye in angle closure glaucoma is:**

- a. Surgical peripheral iridectomy
- b. Yag laser iridotomy
- c. Trabeculotomy
- d. Trabeculectomy

**ANSWER: B**

**70. Topical atropine is contraindicated in:**

- a. Retinoscopy in children
- b. Iridocyclitis
- c. Corneal ulcer
- d. Primary angle closure glaucoma

**ANSWER: D**

**71. Neovascular glaucoma follows:**

- a. Thrombosis of central retinal vein
- b. Acute congestive glaucoma
- c. Staphylococcal infection
- d. Hypertension

**ANSWER: A**

**72. A one-month old baby is brought with complaints of photophobia**

**and watering. Clinical examination shows normal tear passages and clear but large cornea. The most likely diagnosis is:**

- a. Congenital dacryocystitis
- b. Interstitial keratitis
- c. Keratoconus
- d. Buphthalmos

**ANSWER: D**

**73. You have been referred a case of open angle glaucoma. Which of the following would be an important point in diagnosing the case?**

- a. Shallow anterior chamber
- b. Optic disc cupping
- c. Narrow angle
- d. visual acuity and refractive error

**ANSWER: B**

**74. Number of layers in neurosensory retina is:**

- a. 9
- b. 10
- c. 11
- d. 12

**ANSWER: A**

**75. In retinal detachment, fluid accumulates between:**

- a. Outer plexiform layer and inner nuclear layer.
- b. Neurosensory retina and layer of retinal pigment epithelium
- c. Nerve fiber layer and rest of retina.
- d. Retinal pigment epithelium and Bruch's membrane.

**ANSWER: B**

**76. 100 days glaucoma is seen in:**

- a. Central Retinal Artery Occlusion
- b. Branch Retinal Artery Occlusion
- c. Central Retinal Vein Occlusion
- d. Branch Retinal Vein Occlusion

**ANSWER: C**

**77. A young patient with sudden painless loss of vision, with systolic murmur and ocular examination reveals a cherry red spot with clear AC, the likely diagnosis is:**

- a. Central Retinal Artery Occlusion
- b. Central Retinal Vein Occlusion
- c. Diabetes Mellitus
- d. Branch Retinal Vein Occlusion

**ANSWER: A**

**78. Amaurotic cat's eye reflex is seen in:**

- a. Papilloedema

- b. Retinoblastoma
- c. Papillitis
- d. Retinitis

**ANSWER: B**

**79. Commonest lesion which hinders vision in diabetic retinopathy is:**

- a. Macular oedema
- b. Microaneurysm
- c. Retinal hemorrhage
- d. Retinal detachment

**ANSWER: A**

**80. Commotio retinae is seen in:**

- a. Concussion injury
- b. Papilloedema
- c. Central retinal vein thrombosis
- d. Central retinal artery thrombosis

**ANSWER: A**

**81. Night blindness is caused by:**

- a. Central retinal vein occlusion
- b. Dystrophies of retinal rods
- c. Dystrophies of the retinal cones
- d. Retinal detachment

**ANSWER: B**

**82. In Central retinal artery occlusion, a cherry red spot is due to:**

- a. Hemorrhage at macula
- b. Increased choroidal perfusion
- c. Increase in retinal perfusion at macula
- d. The contrast between pale retina and reddish choroids

**ANSWER: D**

**83. The most common primary intraocular malignancy in adults is:**

- a. Retinoblastoma
- b. Choroidal melanoma
- c. Squamous cell carcinoma of conjunctiva
- d. Iris nevus

**ANSWER: B**

**84. A patient of old standing diabetes mellitus noticed sudden muscae volitantes. On examination, the red reflex was dim, with no details of fundus could be seen. He might have:**

- a. Non proliferative diabetic retinopathy
- b. Cystoid macular edema
- c. Vitreous hemorrhage
- d. Central retinal vein occlusion

**ANSWER: C**



**85. Occlusion of the lower nasal branch of the central retinal artery results in one of the following field defects:**

- a. Lower nasal sector field defect
- b. Upper nasal sector field defect
- c. Upper temporal field defect
- d. Lower temporal sector field defect

**ANSWER: C**

## OPTIC NERVE

**86. Primary optic atrophy results from:**

- a. Retinal disease
- b. Chronic glaucoma
- c. Papilledema
- d. Neurological disease

**ANSWER: D**

**87. Retro-bulbar optic neuritis is characterized by:**

- a. Marked swelling of the optic disc.
- b. Impaired direct light reflex in the affected eye
- c. Impaired consensual light reflex in the affected eye
- d. Normal visual acuity

**ANSWER: B**

**88. The type of optic atrophy that follows retro-bulbar neuritis is:**

- a. Secondary optic atrophy
- b. Consecutive optic atrophy
- c. Glaucomatous optic atrophy
- d. Primary optic atrophy

**ANSWER: A**

**89. A male patient 30 years old with visual acuity of 6/6 in both eyes. Twelve hours ago he presented with drop of vision of the left eye. On examination, visual acuity was 6/6 in the right eye and 6/60 in the left eye. Fundus examination showed blurred edges of the left optic disc. The most probable diagnosis is:**

- a. Raised intra cranial pressure
- b. Raised ocular tension
- c. Central retinal artery occlusion
- d. Optic neuritis

**ANSWER: D**

**90. All are seen in 3rd nerve palsy except:**

- a. Ptosis
- b. Diplopia
- c. Miosis
- d. Outwards eye deviation

**ANSWER: C**

**91. Homonymous hemianopia is due to lesion at:**

- a. Optic tract
- b. Optic nerve
- c. Optic chiasma
- d. Retina
- e. Occipital cortex

**ANSWER: A**

**92. Which is not found in papilloedema?**

- a. Blurred vision
- b. Blurred margins of disc
- c. Cupping of disc
- d. Retinal edema

**ANSWER: C**

**93. Optic disc diameter is:**

- a. 1 mm
- b. 1.5 mm
- c. 2 mm
- d. 3 mm

**ANSWER: B**

**94. Optic nerve function is best studied by:**

- a. Direct Ophthalmoscope
- b. Retinoscope
- c. Perimetry
- d. Gonioscopy

**ANSWER: C**

## NEUROPTHALMOLOGY

**95. Optic nerve axon emerges from:**

- a. Ganglion cells
- b. Rods and cones
- c. Amacrine cells
- d. Inner nuclear layer

**ANSWER: A**

**96. Papilloedema has all the following characteristics except:**

- a. Marked loss of vision
- b. Blurring of disc margins
- c. Hyperemia of disc
- d. Field defect

**ANSWER: A**

**97. Homonymous hemianopia is the result of a lesion in:**

- a. Optic chiasma

- b. Retina
- c. optic tract
- d. Optic nerve

**ANSWER: C**

**98. Mydriasis is present in all the following except:**

- a. Third nerve lesion
- b. Pontine haemorrhage
- c. Datura poisoning
- d. Fourth stage of anesthesia

**ANSWER: B**

**99. D-shaped pupil occurs in:**

- a. Iridocyclitis
- b. Iridodonesis
- c. Cyclodialysis
- d. Iridodialysis

**ANSWER: D**

**100. In complete third nerve paralysis the direction of the affected eye in the primary position is:**

- a. Inward
- b. Outward
- c. Outward and up
- d. Outward and down

**ANSWER: D**

### **STRABISMUS**

**101. All the following are extraocular muscle of eye except:**

- a. Superior rectus
- b. Ciliary muscle
- c. Inferior oblique
- d. Superior oblique

**ANSWER: B**

**102. The action of superior rectus is:**

- a. Elevation, intorsion, abduction
- b. Elevation, intorsion, adduction
- c. Elevation, extorsion, adduction
- d. Elevation, extorsion, abduction.

**ANSWER: B**

**103. The action of inferior oblique is:**

- a. Depression, extorsion, abduction
- b. Depression, extorsion, adduction
- c. Elevation, extorsion, adduction
- d. Elevation, extorsion, abduction

**ANSWER: D**

**104. The only extraocular muscle which does not arise from the apex of the orbit is:**

- a. Superior rectus
- b. Superior oblique
- c. Inferior oblique
- d. Inferior rectus

**ANSWER: C**

**105. In concomitant squint:**

- a. Primary deviation > Secondary deviation
- b. Primary deviation < Secondary deviation
- c. Primary deviation = Secondary deviation
- d. None of the above

**ANSWER: C**

**106. In paralytic squint, the difference between primary and secondary deviation in the gaze of direction of the paralytic muscle:**

- a. Increases
- b. Decreases
- c. Remains the same

**ANSWER: A**

**107. In grades of binocular vision; grade 2 is:**

- a. Simultaneous macular vision
- b. Fusion
- c. Stereopsis

**ANSWER: B**

**108. The best treatment for amblyopia is:**

- a. Orthoptic exercises
- b. Occlusion
- c. Surgery
- d. Best treat after age 10 years

**ANSWER: B**